									1				
PATENT APPLICATION FEE DETERMINATION RECORD									Appl	Application or Docket Number			
L	· .		ffective Dec	ember c	3, 20c	<u>.</u>				5,	82 181	6	
		CLAIMS /	AS FILED -			~.		SMALL ENT	rity /	OR	OTHER SMALL E		
<u>L</u> ,	TIONAL	STAGE FEES	(Colum	ın 1)	'	(Column 2)	1		T	7		T	
<u> </u>		STAGE PEES					1 1	RATE	FEE	 	RATE	FEE	
	SIC FEE		SMALL ENT Satisfies PCT-A		<u> </u>	RGE ENT. = \$ 300 other-situations =	-	BASIC FEE	115U	OR	BASIC FEE	<u> </u>	
EXA	AMINATION FE	:E	(4) = \$50	0/\$100	\$	\$ 100 / \$ 200]]	EXAM. FEE	LOV	<u>'</u>	EXAM. FEE		
SEA	ARCH FEE	•	U.S. is ISA = \$ ALL other cor \$ 200 / \$	ountries =	All Of	other situations = \$ 250 / \$ 500		SEARCH FEE	200		SEARCH FEE		
FEE	E FOR EXTRA S	SPEC. PGS.	min	nus 100 =	l	/ 50 ≐]]	X \$ 125 =		1 '	X \$ 250 =	<u> </u>	
тот	TAL CHARGEAE	BLE CLAIMS	46 mi	inus 20 =	1.0	Jb!	11	X \$ 25 =	1/251	OR	X \$ 50 =		
INDI	EPENDENT CL	AIMS	72_	minus 3 =	1*		11	X \$ 100 =		OR	X \$ 200 =		
MUL	TIPLE DEPEN	NDENT CLAIM PRE	ESENT				11	+ \$ 180 =		OR	+ \$ 360 =		
* If	the difference	e in column 1 is I	less than zer	o, enter "C)" in cr	olumn 2	<i>i</i> , ~	TOTAL	11/1/1	OR	TOTAL	<u> </u>	
ĺ		A.C	- control	~ · •				•	HV	1			
ĺ	•	(Column 1)	AMENDED	;		(Column 3)		SMALLE	-NTITY	OR	OTHER T		
T.A		CLAIMS REMAINING AFTER		(Colum HIGHE NUMB PREVIO	EST BER DUSLY	PRESENT	1 [RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MENT	Total	*	Minus	PAID F	OR	=	1	X \$ 25 =	FE-	OR	X \$ 50 =	FEL	
AMENDMENT	Independent		Minus	***		-	1	X \$ 100 =	 	OR	X \$ 200 =	· · · · · · · · · · · · · · · · · · ·	
¥	ļ	SENTATION OF M	_l	<u>.l</u>	MIA 1		1 +	+ \$ 180 =		OR	+ \$ 360 =		
	FINGT	ENTATION	ULTIFIC DE.	ENULI			i L	TOTAL ADDIT.		OR	TOTAL ADDIT.	-	
÷								FEE		UN	FEE	<u> </u>	
		(Column 1)	_ 	(Colum		(Column 3)	-			. ,			
AT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOU PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
OMEN	Total		Minus	**		=	1	X \$ 25 =		OR	X \$ 50 =		
AMENDMENT	Independent		Minus	***		e .	, [X \$ 100 =		OR	X \$ 200 =		
	FIRST PRES	SENTATION OF MU	IULTIPLE DEPI	ENDENT C	LAIM		1	+ \$ 180 =		OR	+ \$ 360 =	· .	
			***************************************				7	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
								·			• =		
	•	· ' n.		- u t.						,			
**	If the "Highest Nur		ld For" IN THIS SP	PACE is less	than '20	?0', enter "20".							
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													